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United States District Court
For the District of Delaware

FILED

FEB - 4 2008

U.S. DISTRICT COURT
DISTRICT OF DELAWARE

Acknowledgement of Service Form
For Service By Return Receipt

Civil Action No. 07CV838-SLR

Scanned

Attached below is a return receipt card reflecting proof of service upon the named party on the date shown.

<p>SENDER: COMPLETE THIS SECTION</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. <input checked="" type="checkbox"/> Print your name and address on the reverse so that we can return the card to you. <input checked="" type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits. <p>1. Article Addressed to:</p> <p style="margin-left: 40px;">LOREN MEYERS DEPUTY ATTORNEY GENERAL DEPARTMENT OF JUSTICE 820 N. FRENCH STREET WILMINGTON, DE 19801</p>	<p>COMPLETE THIS SECTION ON DELIVERY</p> <p>A. Signature <i>Vill</i></p> <p>B. Received by (Printed Name) <i>KOY KING TUNDE</i></p> <p>C. Date of Delivery <i>FEB 01 2008</i></p> <p>D. Is delivery address different from item 1? <input checked="" type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p style="text-align: center;"><i>RODNEY</i></p> <p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input checked="" type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. </p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label)</p> <p style="text-align: center;">7007 2680 0003 3006 5942</p>	